

WOODSTOCK POLICE DEPARTMENT

GEORGIA CRIME INFORMATION CENTER CONSENT FORM

I HEREBY AUTHORIZE THE CITY OF WOODSTOCK POLICE DEPARTMENT TO RECEIVE ANY CRIMINAL HISTORY RECORD INFORMATION PERTAINING TO ME, WHICH MAY BE IN THE FILES OF ANY STATE OR ANY LOCAL CRIMINAL JUSTICE AGENCY IN THE STATE OF GEORGIA.

PLEASE PRINT THE FO	<u>)LLOWING:</u>			
FIRST/ NOMBRE	MIDDLE/ 2° NOMBRE	LAST/ APELLIDO	MAIDEN/AP	ELLIDO DE SOLTERA
STREET ADDRESS/ DC	OMICILIO CITY, S	TATE & ZIP CODE/ CIUDA	D, ESTADO, CO	DIGO POSTAL
DATE OF BIRTH/ FECH	A DE NACIMIENTO	SOCIAL SECURITY N	IUMBER/NO. DE	SEGURO SOCIAL
SEX/ SEXO M/F RAG	CE/ RAZA HEIGHT/ ALTURA	WEIGHT/PESO E	YES/ OJOS	HAIR/ CABELLO
DRIVERS LICENSE# / N	IO. DE LICENCIA STATE/ EST	TADO EXPIRATION	DATE/ FECHA D	E VENCIMIENTO
SIGNATURE/ FIRMA	DATE OF REQUEST/ F	ECHA PHONI	E NUMBER/ NO.	DE TELEFONO
PLEASE CHECK ONLY	ONE OF THE BELOW PURPOSE	CODES:		
☐ MENTALLY DISABLI	ED EMPLOYMENT (PURPOSE CO	<u>DE M)</u>		
□ ELDERLY/NURSING	CARE EMPLOYMENT (PURPOSE	CODE N)		
□ CHILD/DAYCARE EN	MPLOYMENT OR VOLUNTEER (PL	JRPOSE CODE W)		
□ EMPLOYMENT WITH	I CRIMINAL JUSTICE AGENCY - 1	NON SWORN (PURPOSE	CODE J)	
☐ EMPLOYMENT WITH	I CRIMINAL JUSTICE AGENCY - S	SWORN (PURPOSE CODE	<u> Z)</u>	
	MANAGERS PERMIT (PURPOSE (
	NAL JUSTICE PURPOSES – (HOU) CIFIC REASON ON LINE BELOW		TE/PUBLIC EMP	LOYMENT, ETC.) -
FLLAGE EXPLAIN OF E	OII IC REAGON ON LINE BELOW	<u>I ON OSE CODE E)</u>		
Public Safety Acad	emy – Please bring your drive	r's license when turnin	g this form in.	
TO BE COMPLETED BY	THE CITY OF WOODSTOCK POL	LICE DEPARTMENT:		
	ORY FOUND THROUGH GCIC SYS	<u>.</u>		
	FOUND THROUGH GCIC SYSTE		D)	
☐ ACTIVE WARRANT			-,	
SIGNATURE OF AGEN	CY HEAD OR DESIGNEE			TURE AND SEAL
		SWORM	I BEFORE ME OI , 20	N DAY OF